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U R B A N D I S T R I C T C O U N C I L

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

and the

CHIEF PUBLIC HEALTH INSPECTOR



1958



ETON URBAN DISTRICT COUNCIL

Health, Highways and Works Committee

January to May, 1958

Chairman:

Councillor R.J.Clibbon.

- " S.E.R.Judd, J.P.
(Chairman of the Council)
- " Mrs.W.H.Hay.
- " Mrs.A.Van Oss.
- " A.E.Anderson.
- " W.A.Barker.
- " C.V.Rigden.
- " B.T.Wolfe.

Health, Highways and Works Committee

May to December, 1958

Chairman:

Councillor R.J.Clibbon.

- " B.T.Wolfe, J.P.,
(Chairman of the Council)
- " A.E.Anderson.
- " Mrs.A.Van Oss.
- " E.D.Daird.
- " S.E.R.Judd.
- " C.V.Rigden.
- " W.H.Sharp.



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ETON URBAN DISTRICT COUNCIL

Annual Report

of the

Medical Officer of Health

For the Year 1958.

To the Chairman and Members of the Council:

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting the annual report for the year 1958. The report of the Chief Public Health Inspector, which gives an outline of existing services is as usual included.

The population of the district has varied very little from the previous year, the total increase as estimated by the Registrar General at mid-year being 30. There was a slight fall in the number of live births and an increase in the number of deaths, while both infant mortality and neo-natal mortality remains at practically the same figure as 1957. No deaths were recorded as due to or associated with pregnancy and childbirth.

The usual notifiable diseases which call for the attention of the public health department are the lowest in numbers recorded since 1948 and continue as for some years to be mild in character. Only rarely does one encounter the severe complications which so frequently accompanied many infectious diseases at an earlier period, and with the use of modern antibiotics these are more readily controllable when they do appear. Hospital treatment of diseases such as scarlet fever and measles may be found necessary not so commonly because of the condition of the patient but because of the lack of facilities for treatment and isolation at home, and this is more particularly the case when a number of people of susceptible age are living in close proximity or in the same building.

As every Medical Officer of Health is expected to play his part in the national campaign for cleaner food and the

eradication of diseases such as Food Poisoning or Dysentery this is a subject which has been kept very much in mind. We are not beset in this district by large or frequent epidemics but there is however a good deal of minor illness with gastrointestinal symptoms to be found at any time and the line of demarcation between this and a case which becomes notifiable is only a matter of degree. In the course of a year this may account for the loss of a considerable number of working hours in addition to unnecessary suffering. A number of minor or abortive infections mostly associated with food are often labelled as "Gastric Flu", a disease which in itself does not exist, and these patients may well be the vectors who are responsible for more virulent sporadic cases of illness which come to notice in more susceptible subjects.

Experimental laboratory work has shown that birds and animals are probably the main reservoirs of the type of infections which cause Food Poisoning and infected human beings who have become chronic or temporary carriers are the means of propagation. Ducks, hens and possibly turkeys concern the Public Health Department in this respect and apart from rats and mice well known as carriers, domestic animals such as dogs and cats are also incriminated.

I wish in passing to draw attention to another aspect of faulty food hygiene which merits publicity as the cure is in the hands of the consumer, viz. the dirty milk bottle. The modern bottle washing machine can clean and almost sterilize practically any milk bottle which has not been misused, but a bottle which has been misused is quite likely to be unwashable and a small proportion of such bottles find their way back into circulation in spite of the elaborate precautions taken by the dairies. Most of us are aware that milk bottles are on occasions used to contain such things as paint, oil, disinfectant or corrosives, which may be extremely difficult to remove completely or may damage the inner surface of the bottle. A small minority of the community will continue to misuse milk bottles without any thought of the consequences in spite of efforts to prevent them by educational methods or propaganda material and such people are a menace. The law relating to milk makes no provision which might deter those who will not be taught or advised in this respect but the dairyman on the other hand is usually a vulnerable target.

During the year under review there has been a considerable amount of legislation on the subject of Slaughterhouses designed to secure the observance of sanitary and cleanly conditions in connection with the constructional operation of slaughterhouses and the handling of meat therein. Trying to keep abreast with

the literature on this subject has been time consuming but in practice the administration has not called for any particular action on our part.

The programme of immunisation against Diphtheria, Whooping Cough and Tetanus has been continued without alteration. These are offered at the Maternity and Child Welfare Clinics and also carried out by General Practitioners, while through the School Health Service new entrants are offered a booster injection against Diphtheria at the age of 5. Poliomyelitis vaccination is not offered at Maternity and Child Welfare Clinics but is carried out under a special arrangement of registration and individual appointment all of which is done at the Town Hall, Slough on behalf of the County Health Department. As questions are frequently asked about Poliomyelitis vaccination I feel it is worth while recapitulating the arrangements at present in operation.

The extended scheme offers vaccination to the following groups:-

- Group A: All persons born in the year 1933 and after and over the age of six months.
- Group B: All expectant mothers.
- Group C: General practitioners and their families.
- Group D: Ambulance driver/attendants and their families.
- Group E: Hospital staff who come into contact with patients and their families.

In addition, third(boosters) doses are given not less than seven months after the second injections but not at the expense of those persons applying for and waiting for their first two injections.

The present arrangement for vaccination at Local Health Authority Centres manned either by Local Authority Medical Officers or by General Practitioners working on a sessional basis, has proved successful and will be continued. At the same time the opportunity will be given to the general public of a choice between vaccination at these Centres or by their own family doctors.

All persons wishing to be vaccinated by their own family doctors may arrange with them directly. Those wishing to be vaccinated in Local Health Authority Centres should apply to the Local Health Authority in the usual way, i.e. by completing a consent card made available in Area Health Offices, Child Welfare

Centre, Public Libraries, etc., and returning it to the Area Medical Officer named on the card. Expectant mothers should apply for vaccination either to the general practitioner or to the hospital medical officer undertaking their ante-natal care, and general practitioners wishing to vaccinate themselves and their families should apply to the appropriate Area Medical Officer for the necessary vaccine. Ambulance driver/attendants and their families are advised either to apply to their family doctors or to the appropriate Area Medical Officer for vaccination. Hospital authorities make their own arrangements for the vaccination of hospital staff and their families, and vaccine is made available on application. Third(booster)injections are given in order of precedence; those vaccinated with two injections in 1956 being dealt with first and so on. Should supplies of vaccine be limited at any time, priority is given to persons awaiting their first two injections.

Trouble was experienced during the year from the Roundsmoor Ditch which forms the western boundary of the district. This is a watercourse which carries the effluent from the Slough Borough Council's sewage works at Cippenham. The flow of water has been found from time to time to be obstructed by materials which are probably thrown into it by children. Apart from this the channel is inadequate to carry the large and ever increasing volume of effluent being discharged into it. Overflowing has taken place on a large scale at a slightly higher level on to land just over the Eton Urban District boundary and nuisance & from smell has arisen and complaints have been received from residents nearby in this district. The matter was reported and the Council entered into correspondence with the Thames Conservancy who are the Authority responsible for the condition of the stream. It is estimated that about 6,000,000 gallons of effluent per day are being discharged into the channel and I pointed out that widening and deepening of the channel would be necessary to prevent a recurrence. Merely clearing the channel of debris would not be an effective cure. Certain assurances were obtained from the Thames Conservancy and the condition of the stream has been kept under observation.

A considerable amount of rodent control has been carried out during the year and unfortunately this work does not show any visible results in return for the time and expenditure devoted to it. The dangers of rat infestation are well known and although the level of infestation has been reduced, there are many old properties in the district where access is difficult to the possible breeding places and it will be necessary to maintain all measures of control on at least the present scale.

I wish to thank the members of the Council for their support in all public health matters and I must note with regret the resignation of Mr. Smith the Chief Public Health Inspector whose knowledge of the district and experience has always been of great assistance.

I am,

Your Obedient Servant,

G. HOBBS

Medical Officer of Health

GENERAL STATISTICS

Area	993 acres
Number of inhabited houses at end of 1958...	1,180
Rateable value at 1.4.58	£66,764.
Product of Penny Rate 1957/1958.	£262.6.10.
Population (Registrar General's estimate for mid year)...4,980.	

VITAL STATISTICS

<u>Live Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate...	30	24	54
Illegitimate.	2	1	3
	<u>32</u>	<u>25</u>	<u>57</u>
Birth Rate per 1,000 population.. . . .	11.4		
National Rate...	16.4		
Comparability Factor	1.14		
Illegitimate live birth per cent of total live births.	5.50		
<u>Still Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	1	1	2
Illegitimate.. . . .	<u>-</u>	<u>-</u>	<u>-</u>
	<u>-</u>	<u>1</u>	<u>2</u>
Still Birth Rate per 1,000 Total Births	33.33		
Still Birth Rate per 1,000 Population	0.40		
National Rate per 1,000 Total Births	21.6		
Total Live and Still Births	59		

Infant Mortality (Deaths of Infants under 1 year of age)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate... ..	3	-	3
Illegitimate... ..	1	-	1
	<u>4</u>	<u>-</u>	<u>4</u>

Infant Mortality Rate per 1,000 Live Births... .. 70.2

Infant Mortality Rate per 1,000 Live Births - Legitimate...55.50

Infant Mortality Rate per 1,000 Live Births - Illegitimate 333.33.

National Rate... .. 22.5

Neo-Natal Mortality (Deaths of Infants under 4 weeks of age)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate... ..	2	-	2
Illegitimate... ..	1	-	1
	<u>3</u>	<u>-</u>	<u>3</u>

Neo-Natal Mortality Rate per 1,000 Live Births... 52.6

Maternal Mortality

Total from all causes (including abortion) Nil

Death Rate per 1,000 Live and Still Births Nil

National Rate 0.43

<u>Deaths</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Totals:	30	20	50

Crude Death Rate per 1,000 Population 8.5

Corrected Death Rate - allowing for sex and age. 11.49
(comparability factor = 1.39)

National Death Rate 11.7

Ratio of Corrected Death Rate to National 0.91

CAUSES OF DEATH in the Eton Urban District - 1958

	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, Respiratory	-	-	-
2. Tuberculosis, other	-	-	-
3. Syphilitic disease	-	-	-
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal Infections	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	2	-	2
11. Malignant neoplasm, lung, bronchus	2	1	3
12. Malignant neoplasm, breast	-	-	-
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasm	4	2	6
15. Leukaemia, aleukaemia	-	1	1
16. Diabetes	-	-	-
17. Vascular lesions of nervous system	2	7	9
18. Coronary disease, angina	7	2	9
19. Hypertension with heart disease	1	-	1
20. Other heart disease	3	1	4
21. Other circulatory disease	-	1	1
22. Influenza	-	-	-
23. Pneumonia	1	-	1
24. Bronchitis	2	-	2

Continued.....

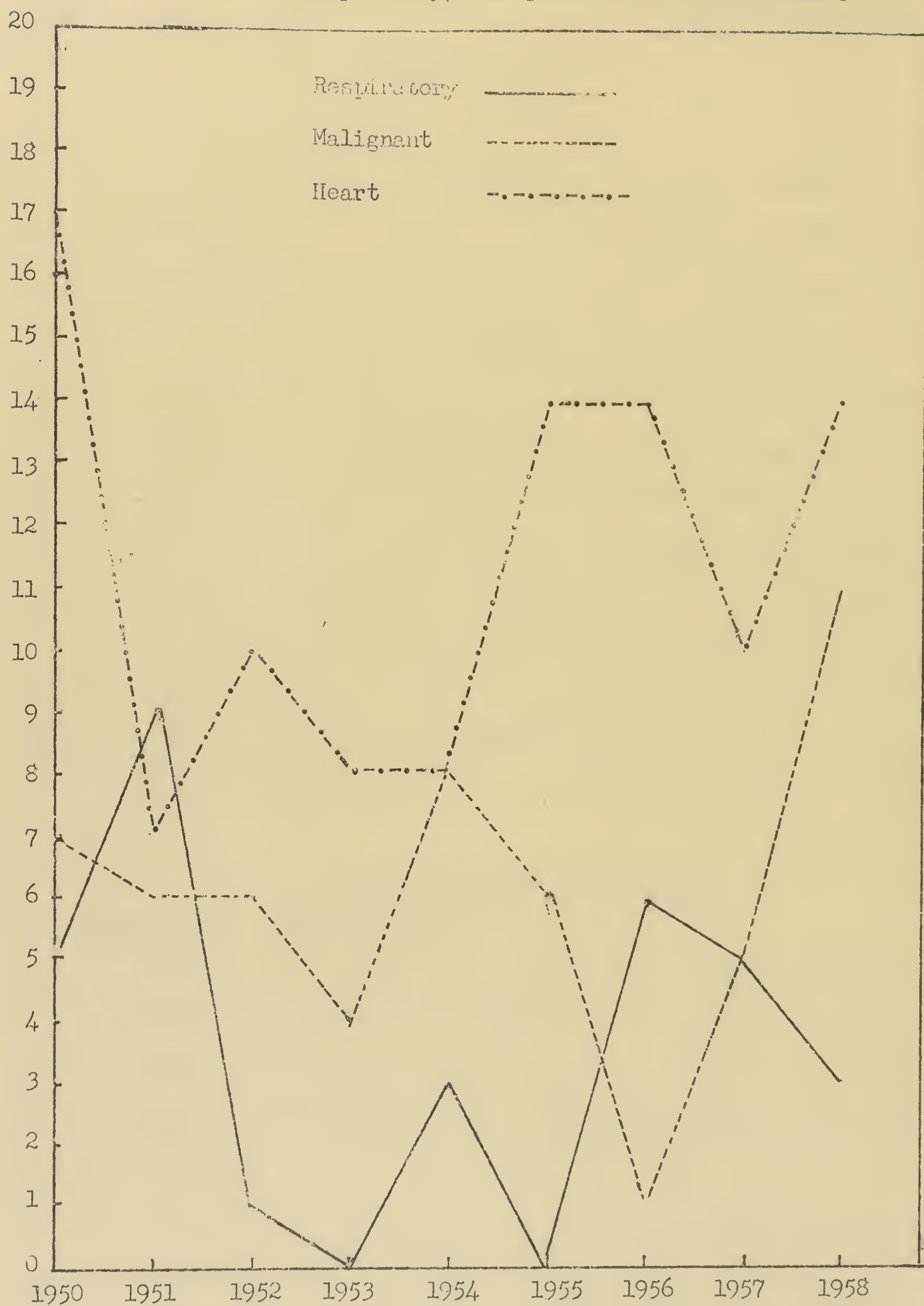
CAUSES OF DEATH (Continued)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
25. Other diseases of the respiratory system	—	—	—
26. Ulcer of stomach and duodenum	1	—	1
27. Gastritis, enteritis and diarrhoea	—	—	—
28. Nephritis and nephrosis	—	—	—
29. Hyperplasia of prostate	—	—	—
30. Pregnancy, childbirth, abortion	—	—	—
31. Congenital malformation	—	—	—
32. Other defined and ill defined diseases	4	3	7
33. Motor vehicle accidents	—	—	—
34. All other accidents	—	2	2
35. Suicide	1	—	1
36. Homicide and operations of war	—	—	—
	<hr/>	<hr/>	<hr/>
All Causes - Total	30	20	50
	<hr/>	<hr/>	<hr/>

Deaths from Principal Causes

	<u>No. of deaths.</u>	<u>Death Rate</u>
Malignant diseases - all types	11	2.29
Vascular lesions of nervous system	9	1.84
Respiratory Diseases	3	0.62
Diseases of heart, all types	14	2.81

Deaths due to Respiratory, Malignant and Heart Diseases.



TUBERCULOSIS

Notification Register - Additions and Deletions.

	Pulmonary			Non-Pulmonary			Combined Totals.
	Male	Female	Total	Male	Female	Total	
Number on Register at 1.1.58	26	19	45	8	3	11	56
Number entered by Primary Notification or on transfer into the district.	-	1	1	-	-	-	1
Number removed from Register.	-	-	-	-	-	-	-
Number remaining on Register at 31.12.58.	26	20	46	8	3	11	57

Infectious Diseases Notifications.

Whooping Cough.....2

Measles.....2

Pulmonary Tuberculosis.....1

VACCINATION AND IMMUNISATION FOR 1958

Primary Immunisation					Re -- Immunisation
	Age at date of final injection.			Total	
	Under 1 year	1 - 4 years	5 - 14 years		
Diphtheria only	14	10	4	28	98
Diphtheria/ Whooping Cough combined	20	14	-	24	-
Whooping Cough only	36	7	-	43	-

	Under 1 year	1 year	2 - 4 years	5 - 14 years	15 or over	Total
Vaccination	42	3	3	1	1	50
Re-vaccination	-	-	-	-	1	1
Tetanus	4	8	-	2	-	14

CLINICS AND TREATMENT CENTRES

Maternity and Child Welfare Clinics

Centre	Location	Sessions	Sessions with Medical Officer
Eton	College Arms, High Street.	1st and 3rd Tuesdays.	3rd Tuesday.
Eton Wick	Village Hall.	1st and 3rd Fridays.	1st Friday.

Married Women's Advisory Clinics

Slough:	Social Centre, Farnham Road, Slough.	Wednesdays 2 - 4.p.m.	
	Health Centre, Burlington Road, Slough.	Fridays 2.30 - 4.p.m.	

Chest Clinic

Upton Hospital, Slough, where appointments may be made with the Chest Physician in Charge.

Venereal Diseases Clinics

King Edward VII Hospital, Windsor. (Including Old Windsor Hospital)
Hillingdon Hospital, Hillingdon.
Royal Berkshire Hospital, Reading.

General Hospitals

The Canadian Red Cross Memorial Hospital, Taplow, Nr. Maidenhead.
King Edward VII Hospital, Windsor.
Old Windsor Hospital, Crimp Hill, Old Windsor.
Upton Hospital, Slough.
Maidenhead General Hospital, Maidenhead.

CLINICS AND TREATMENT CENTRES (Continued)

Chronic Sick

St. Mark's Hospital, Maidenhead.
Old Windsor Hospital, Old Windsor.

Part III Accommodation

Upton Hospital, Slough.
Old Windsor Hospital, Old Windsor.

Maternity Accommodation

Upton Hospital, Slough.
Canadian Red Cross Memorial Hospital, Taplow.
Old Windsor Hospital, Old Windsor.
Colinswood Maternity Home, Farnham Common.
Princess Christian Maternity Home, Windsor.

Ante and Post Natal Clinics

King Edward VII Hospital, Windsor.	Ante Natal	Monday mornings.
King Edward VII Hospital, Old Windsor Unit.	Ante and Post Natal	Friday mornings and Tuesday after
Canadian Red Cross Memorial Hospital, Taplow.	Ante Natal	2nd & 4th Thursda mornings each mon
Colinswood Maternity Home, Farnham Common.	Ante and Post Natal	Monday mornings a Thursday afternoo (Ante Natal) Monday afternoons Friday mornings.(Natal)

ETON URBAN DISTRICT COUNCIL

Annual Report of the Chief Public Health Inspector
For the Year 1958

FOOD INSPECTION

(a) Milk. The area is a scheduled area and all milk produced in the area is sent in bulk for pasteurisation. All milk retailed in the area is now pasteurised and is supplied daily already bottled from premises outside the area. A total of six supplementary licences were issued authorising the special designations "pasteurised" and "tuberculin tested" in relation to milk which was sold by retail from premises registered outside the area of the Urban District, and two dealer's licences authorising the use of the special designation "pasteurised" were issued for the retail of milk from premises within the Urban District. All milk sold from these premises is pre-bottled and pasteurised outside the area. No complaints were received concerning the milk supplied in the area.

(b) Other Foods. The total number of food premises in the area is 53, sub-divided as follows:-

Grocers	8
General Stores	2
Inns	6
Cafes	8
British Restaurant	1
Fishmonger	1
Fried and Wet Fish	1
Butchers	4
Bakers and Confectioners	3
College Tuck Shops, Stores and Confectioners	2
Sweets, Ice Cream and Tobacco	9
Greengrocers	2
Dairies	1
Bakehouses	3
Summer Stalls	2

53

There are twenty four premises registered under Section 16 of the Food and Drugs Act 1955, but no dairies under the Milk and Dairies Regulations 1949 to 1954. The above registrations are sub-divided as follows:-

Sale of Ice Cream	8
Sale of Ice Cream and Preserved Food	5
Sale of Preserved Foods	8
Manufacture of Preserved Foods	3

Thirty six inspections were made at the above registered food premises. With the exception of the three registered premises on which sausages are manufactured the remainder of the registrations relate to the sale of pre-packed ice cream and preserved foods. In almost all cases these are sold as packed by the manufacturer and are stored on the premises in a proper manner.

In almost all cases condemned food is disposed of by burial. Unfit tinned food is removed from its containers and buried, and in some cases condemned food is burnt. There was no necessity for a special examination of a stock or consignment of food.

No ice cream was manufactured in the area. All ice cream was delivered pre-packed by reputable manufacturers.

Food Hygiene. There have been no prosecutions under the Food Hygiene Regulations.

General. Upon inspection thirteen tins of food, two stones of fish and a small quantity of other foods were found to be unfit for human consumption and were condemned and destroyed under my supervision.

(c) Meat. There are no licensed slaughterhouses in the Urban District. Such facilities as are required are provided by the public slaughterhouse at Slough. During the year there has been a considerable reduction in pig breeding and fattening in the area which constitutes most of the meat reared for slaughtering. Beyond this only dairy herds are kept. Meat for human consumption is supplied to the butchers mainly through wholesalers, and only a small proportion comes from Slough slaughterhouse. All post mortems are therefore carried out at the place of slaughter, but as a result of periodic inspections and voluntary surrender 37 lbs. of meat in various quantities were found to be unfit for human consumption and were condemned by me and destroyed under my supervision.

No applications have been received during the year for grading under the Pig Marketing Guarantee Scheme.

KITCHEN WASTE

There has been a considerable decrease in the amount of kitchen waste collected by private pigkeepers due to the reduction in pig keeping. In many cases kitchen waste is now disposed of with the refuse and special steps are taken to see that this does not encourage an increase in the rat infestation of the refuse tip.

During the year two smallholdings which caused considerable nuisance from cooking and sterilizing kitchen waste have been disposed of for housing development and this nuisance has now therefore been abated.

REFUSE COLLECTION AND DISPOSAL

With the exception of national holiday periods the Council continue to maintain a weekly collection of refuse. The refuse is disposed of by controlled tipping.

RODENT CONTROL

During the year considerable attention has been paid to rat infestation with satisfactory results. All cases of infestation reported were dealt with. A one hundred per cent sewer test was carried out and infestation was found in some sections of the sewers and these were treated accordingly. Regular attention is given to the Council's refuse tip.

DRAINAGE AND SANITATION

Sewage is disposed of by arrangement with the Slough Corporation through their Cippenham Disposal Works. There were no major extensions to the sewerage system during the year. Twenty one new premises were connected to the public sewer. Seventeen houses still discharge their sewage into septic tanks which are emptied twice a year by the Council. Nine houses still have bucket closets but negotiations have now been made with the owner and instructions have been given for the houses to be drained into the public sewer.

During the year a breakdown at the only Pumping Station in Eton caused some concern, and although in this instance a repair was quickly effected the Council gave instructions for the second storage tank to be cleaned out and prepared for a second pumping station. This was carried out and foundation work completed for the new dry well and pumping station which is scheduled to be continued during 1959.

MOVEABLE DWELLINGS

The Council have given further short period permissions for six caravans to be used for habitation on Crown Farm Caravan Site.

SLUM CLEARANCE

The Council are still proceeding to deal with the official representations made in respect of two clearance areas involving the clearance of twenty two unfit houses and twelve houses by voluntary negotiation.

WATER SUPPLY

Water to the area is supplied from Windsor Corporation Waterworks in Eton. A piped supply is available to the whole area. During the year Windsor Corporation again restricted the use of water for garden hoses in order to maintain the supply for domestic needs. Approval has now been received for the construction of a service reservoir which, when completed, should balance a supply and prevent this restriction.

Water is tested at fortnightly intervals and copies of water analysis are supplied regularly to the Council by Windsor Corporation. These indicate that the water has been maintained to a proper standard of purity. In addition a sample of water has been submitted for chemical analysis and this has proved satisfactory.

A few premises on the northern boundary of the Urban District are supplied with a piped water supply by the Slough Corporation.

There was no major extension to the water distribution system during the year. During the year twenty one houses were connected to the public supply. All water supplied to the area is chlorinated.

WATER ANALYSIS

1. BACTERIOLOGICAL EXAMINATION OF A SAMPLE OF WATER

Number of Colonies developing on Agar.	1 day at 37°C.	2 days at 37°C.	3 days at 20-22°C.
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Sample of Raw Water	1	1	5
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Sample after Chlorination	0	0	0
---------------------------	---	---	---

Presumptive Coliform reaction.	<u>Present in.</u>	<u>Absent from.</u>	<u>Probable No.</u>
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Sample of Raw Water	50x. ml.	20 ml.	3 per 100 ml.
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Sample after Chlorination	-	100 ml.	0 per 100 ml.
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* Aerogenes Type I and Intermediate Type II

Bact.coli.(Type I)

Sample of Raw Water	-	100 ml.	0 per 100 ml.
---------------------	---	---------	---------------

Sample after Chlorination	-	100 ml.	0 per 100 ml.
---------------------------	---	---------	---------------

Cl.welchii reaction	-		
---------------------	---	--	--

Sample of Raw Water	-	100 ml.	
---------------------	---	---------	--

Sample after Chlorination	-	100 ml.	
---------------------------	---	---------	--

Observations on sample of raw water:

This sample is practically clear and bright in appearance and shows only very slight bacterial impurity including coliform bacteria in small numbers.

Observations on sample of water after chlorination:

This sample is clear and bright in appearance and conforms to the highest standard of bacterial purity.

These results are indicative of a wholesome water suitable for public supply purposes.

2. CHEMICAL EXAMINATION OF A SAMPLE OF WATER

Chemical Results in parts per million.

Appearance:	Faint opalescence with a few particles.
Colour:	10
Odour:	Nil
pH:	7.3
Free Carbon Dioxide:	31
Electric Conductivity:	850
Dissolved Solids dried at 180°C.	565
Chlorine present as Chloride:	60
Alkalinity as Calcium Carbonate:	305
Hardness:	Total 370 - Carbonate 305 Non Carbonate 65
Nitrate Nitrogen:	3.9
Nitrite Nitrogen:	Approx. 0.01.
Ammoniacal Nitrogen:	0.054.
Oxygen Absorbed:	0.60
Albuminoid Nitrogen:	0.049
Residual Chlorine:	...
Metals - Iron	0.55
Zinc	1.0
Copper & Lead	Absent
Turbidity	Less than 3

This sample is practically clear and bright in appearance, and free from metals apart from traces of iron and zinc. The water is very hard in character but its hardness and its content of mineral and saline constituents in solution are not excessive. It is of a high standard of organic quality.

These results are indicative of a water which, from the aspect of the chemical analysis, is pure and wholesome in character and suitable for public supply purposes.

FACTORIES ACTS (Continued)

Part 1 of the Act

2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	No. of cases in which defects were found		No. of cases in which prosecutions were instituted.		
	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	
Want of cleanliness.	3	3	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences	—	—	—	—	—
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	—	—	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act. (not including offences relating to Outwork)	—	—	—	—	—
Totals:	3	3	—	—	—

FACTORIES ACTS, 1937 & 1948

1. INSPECTIONS for the purposes of provisions as to health
(including inspections made by the Public Health Inspector)

Premises	No. on Register.	Number of		Occupiers Prosecuted
		Inspections	Written Notices	
Factories in which Secs.1, 2, 3, 4 & 6 are to be enforced by local authorities.	14	15	-	-
Factories not included in(1) in which Sec.7. is enforced by local authorities.	27	30	2	-
Other premises in which Sec.7. is enforced by the local authority. (excluding out-workers premises)	-	-	-	-
Total:	41	45	2	-

FACTORIES ACT (Continued)

Part VIII of the Act

(Sections 110 and 111)

Nature of Work.	Section 110.			Section 111.		
	No. of outworkers in August list required by Sec.110(1)(c).	No. of cases of default in sending lists to the Council.	No. of prosecutions for failure to supply lists.	No. of instances of work in unwholesome premises.	Notices served.	Prosecutions.
Wearing apparel (Making etc. Cleaning and Washing).	14	-	-	-	-	-
Total :	14	-	-	-	-	-

